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	U.S. PATENT DOCUMENTS							
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M-		5,187,637		Embree	02/16/1993			
]		5,587,869		Azumi et al.	12/24/1996			
1		5.926.064		Hariton	07/20/1999			
		6,137,153		Le et al.	10/24/2000			
$\sqrt{}$		6,262,469		Le et al.	07/17/2001			
144		S/N 10/143.557	'	Hyde et al. (Assignee - Inpinj)	05/09/2002			
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FOREIGN PATENT DOCUMENTS								
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